



HAWAII STATE ETHICS COMMISSION 73 JUN 13 P1 :14 ORGANIZATION'S EXPENDITURES AND CONTRIBUTIONS REPORT

REF	PORT YEAR: 20	13	Amended Statem	ent		STATE OF HAWAII	
For	Lobbying Reporting P	Period: January 1 -	last day of February	✓ March 1 - April 30	May	ATE ETHICS COMMISSID	
OR	GANIZATION INFO	RMATION					
AΑ	RP Hawaii			Steven Tam			
Organization Name				Contact Person			
11:	32 Bishop St.,	Suite 1920					
Mail	ling Address (Numb	er and Street or P.O. B	ox)				
Honolulu				HI		96813	
City				State		Zip Code	
(808) 545-6005 s			stam@aar	p.org			
Tele	ephone	Extension	Email Address	S			
PAF	RT I. TOTAL EXPE	NDITURE\$					
					_	Total Amount	
1							
2							
3	. +3-				3		
4	Compensation Paid to Lobbyists (Attached Additional Sheets As Needed) List the names of all lobbyists and compensation paid to lobbyists during the statement period						
	Lobbyist Name			Compensation Paid			
	A. Steven L. Ta	m		A10,3	45.00		
	В		_	В			
	c	·		c			
	D			D			
	E			E			
	F			F			
	G. Total from Additional Attached Sheet(s)			G			
	Add lines A throu	gh G		Total Compensation	Paid ► 4	10,345.00	
5	Fees Paid to Con	sultants (other than t	o Lobbyists)		5		
6	Entertainment & Events				6		
7	7 Receptions, Meals, Food & Beverages				7	-	
8	8 Gifts			<u></u> -	8		
9	9 Loans				9		
10	Other Disburseme	ents			10		
	Add lines 1 thro	ugh 10		Total Expend	ituras 🏲	10,345.00	

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EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

Name and address of each person with respect to whom expenditures for the purpose of lobbying in the total sum of \$25 or more in any single calendar day was made and amount or value of expenditures

Name & Address	Amount or Value		
			0.00
Check here if addition	nal sheets are attached		
	JRES OF \$150 OR MORE Pl with respect to whom expenditures for value of expenditures	ER PERSON or the purpose of lobbying in the aggreg	rate of \$150 or more was made during
Name & Address			Amount or Value
			0.00
· · · · · · · · · · · · · · · · · · ·			
Check here if addition	nal sheets are attached		
PART II. CONTRIBUTIONS	S DECEIVED		
	making contributions to the filer for pe	urposes of lobbying in the total sum of \$	\$25 or more during the statement period
Name & Address			Amount or Value
			0.00
Check here if addition	nal sheets are attached		
PART III. SUBJECT AREA	S OF LOBBYING		
Legislative and/or administrative ad	tion in the following areas was suppo	rted or opposed during the statement p	eriod:
Agriculture	Education	✓ Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	✓ Transportation
Culture, Arts, Historic Preservation	✓ Health	Planning, Land & Water Use Management	Other (indicate below):
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	
AUTHORIZED PERSON	1 11111		
AUTHORIZED FERSON	1. 1/	1	/ /
Barbara Kim Stanto	n Ball (State Director	6/6/2013
Print Name of Authorized P	erson (First M.T. Last)	Title	Date (m/d/yyyy)
CERTIFICATION: By che	cking this box, you signify and affin	m that you are the person whose nar	ne appears as the "Authorized Perso

above and the information contained in the form is true, correct and complete to the best of your knowledge and belief. You further certify that you understand that there are statutory penalties for failing to report the information required by Hawaii law.